STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

1. TITLE OF NEWSPAPER: Miner County Pioneer		2. DATE: 9/26/24
3. FREQUENCY OF ISSUE: Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 52	3B. ANNUAL SUBSCRIPTION PRICE: $ 67.04
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) 120 S Main St - PO Box 220 HOward SD 57349		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) 120 S Main St - PO Box 220 Howard SD 57349		
6. FULL NAME OF PUBLISHER: Carla Poulson		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. FULL NAME: Carla Poulson COMPLETE MAILING ADDRESS: 120 S Main St - PO Box 220 Howard SD 5734		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	1000	1000
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors, and counter sales.	195	188
2. Mail Subscription (Paid and or requested)	620	616
3. Paid Electronic Copies	0	0
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	815	804
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	18	18
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	10	10
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	843	832
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	147	158
2. Return from News Agents	10	10
G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)	1000	1000

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:

C.R
(Signature)

Owner
(Title)

State of South Dakota)
§
County of Miner)

Sworn to before me this 26 day of Sept 2024

Notary Public

My commission expires: 10-10-25

(Seal)

HEATHER M. POULSON
NOTARY PUBLIC
SOUTH DAKOTA

Form: SOS REC 051 9.2016